

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Tam</i>		3-21-01
O.I.P.E. CLASSIFIER	<i>[Signature]</i>		7/7
FORMALITY REVIEW	<i>T.H.</i>	953	08-01-01
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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If more than 150 claims or 10 actions  
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